

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 29 PM 3:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F02000000256

1. Corporation Name

GENERAL WASTE CORPORATION

Principal Place of Business

Mailing Address

4800 NORTH FEDERAL HIGHWAY, S-D1
BOCA RATON FL 33431

4800 NORTH FEDERAL HIGHWAY, S-D1
BOCA RATON FL 33431



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
15301 SPECTRUM DR.
Suite, Apt. #, etc.
STE. 390

3. New Mailing Office Address, If Applicable
P.O. BOX 5539
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

01/15/2002

City & State
ADDISON, TX

City & State
KINGWOOD, TX

Zip
75001

Country
U.S.A.

Zip
77325

Country
USA

5. FEI Number

22-3850210

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
POB	HABETO, HARRY	4800 NORTH FEDERAL HIGHWAY, S-D1	BOCA RATON FL 33431
ST CFO	PROCTOR, RONALD E	4800 NORTH FEDERAL HIGHWAY, S-D1 20402 SUNNY SHORES DR	BOCA RATON FL 33431 Humble, TX 77346
CEO	MOOREHEAD, DON	4800 NORTH FEDERAL HIGHWAY, S-D1 15301 SPECTRUM DR. #390	BOCA RATON FL 33431 ADDISON, TX 75001
D	HUGHES, TOM	15301 SPECTRUM DR. #390	ADDISON, TX 75001

200024254432
10/29/03 01057-009 **750.00

8. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

9. Name and Address of New Registered Agent

Name

RONALD E. PROCTOR

Street Address (P.O. Box Number is Not Acceptable)

1601 N. 34th ST.

Suite, Apt. #, Etc.

City

Tampa

State

FL

Zip Code

33605

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

Date

10/24/03

REGISTERED AGENT MUST SIGN

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/27/03 281-852-2078

Daytime Phone #

CR2E040 (7/03)